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STANDARD FORM 120 REV. APRIL 1957 GEN. SERV. ADMIN. FPMR (41 CFR) 101-43.311		REPORT OF EXCESS PERSONAL PROPERTY		1. REPORT NO. 85-272		2. D. DATED 3-13-85		3. TOTAL COST \$ 10,000	
4. TYPE OF REPORT (Check one only of "a," "b," "c," or "d")		<input checked="" type="checkbox"/> a. ORIGINAL <input type="checkbox"/> b. CORRECTED		<input type="checkbox"/> c. PARTIAL W/D <input type="checkbox"/> d. TOTAL W/D		(Also check "e" and/or "f" if appropriate)		<input type="checkbox"/> e. OVERSEAS <input type="checkbox"/> f. CONTRACTORS INV	
5. TO (Name and Address of Agency to which report is made) THRU Office of Federal Supply & Service Region W Cust. Ser. Bur. 7th & D St., S. W. Wash., D. C. 20407						6. APPROP. OR FUND TO BE REIMBURSED (if any)			
7. FROM (Name and Address of Reporting Agency) DMHS, NIH, Property Utilization Section Bldg. 13, Room 2E67, Bethesda, Md. 20205						8. REPORT APPROVED BY (Name and Title) George Gilkenson, Chief, Personal Property Branch			
9. FOR FURTHER INFORMATION CONTACT (Title, Address and Telephone No.) Joan Carter Property Disposal Officer, NIH 496-4247 DMHS, NIH, Bldg. 13, Room 2E67, Bethesda, Md. 20205						10. AGENCY APPROVAL (if applicable)			
11. SEND PURCHASE ORDERS OR DISPOSAL INSTRUCTIONS TO (Title, Address and Telephone No.) SAME AS 9						12. GSA CONTROL NO.			
13. FSC GROUP NO. 6120		14. LOCATION OF PROPERTY (If location is to be abandoned give date) C I A Washington, D. C.		15. REIM/REQD YES NO <input checked="" type="checkbox"/> <input type="checkbox"/>		16. AGENCY CONTROL NO.		17. SURPLUS RELEASE DATE	
18. EXCESS PROPERTY LIST									
ITEM NO. (a)	DESCRIPTION (b)	COND. (c)	UNIT (d)	NUMBER OF UNITS (e)	ACQUISITION COST PER UNIT (f) TOTAL (g)		FAIR VALUE % (h)		
	1. Transformers 300 KVA dry type indoor 3 phase 60 Hertz class AA 5 taps 5.5% primary Voltage 13,800 volt secondary voltage 480y/277 model 9T26E5140G5 serial No. DP	9	ea	2	5000	\$ 10,000			
<p>The above equipment is requested by: C I A Chief, New Building Project Washington, D. C. 20805</p> <p>CC: </p>									